

## LETTERS • CORRESPONDANCE

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### The new LMCC

Unless immediate action is taken there are a great many physicians practising in Canada who will find that their credential of Licentiate of the Medical Council of Canada (LMCC) has suddenly become essentially worthless.

Within the next year or so a 2-year internship will be required as part of the "new" LMCC. Physicians who hold the "old" LMCC will be able to retain licensure in their own province of practice, but they will be unable to obtain a licence in any other province unless they have a 2-year internship or a fellowship in the Royal College of Physicians and Surgeons of Canada.

This will have a detrimental effect on a very large group of

physicians. They will be shocked to learn that years of providing excellent patient care means nothing. Readers can help avoid this situation by urging the Federation of Medical Licensing Authorities of Canada and the various provincial licensing authorities to "grandfather" the current LMCC as equivalent to the new LMCC. Help should be demanded from the various provincial medical associations in this effort.

The present direction of events is wrong. Competent physicians will see their credentials devalued and their future opportunities curtailed.

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*[The president of the Federation of Medical Licensing Authorities of Canada responds:]*

Each provincial medical council is given the authority in provincial legislation to grant a licence to practise medicine in that province. Before 1954 physicians who obtained the LMCC by passing the qualifying examination would usually have been granted a provincial licence. Since 1954 the LMCC has been linked to successful completion of 1 year of pre-registration training. As time passed, provincial medical councils introduced regulations that defined this period of training in different ways, with the result that an applicant could be granted a licence in one province but not meet the requirements of another province.

Furthermore, the Federation of Medical Licensing Authorities of Canada has recognized that the present LMCC examination

measures only cognitive skills and requested that the Medical Council of Canada develop an examination that would measure the skills and attitudes acquired after a period of postgraduate training appropriate for a physician in independent medical practice. The council has developed a two-part examination: part 1 will be written at the time of graduation from medical school and part 2 after 12 months of postgraduate training. The council has decided that this will be the basis for granting the LMCC.

Concurrently, the provincial medical licensing authorities (with the exception of Quebec) have agreed to accept completion of this two-part examination plus certification by either the College of Family Physicians of Canada or the Royal College of Physicians and Surgeons of Canada as the basis for licensure. They have also agreed that provision will be made to provide licensure for trainees who have been unable to enter programs or obtain certification in family medicine or a specialty. This will require completion of the two-part examination plus 24 months of multidisciplinary training, the content of which will be defined in the near future. The date after which all provincial licensing authorities will require at least 2 years of training will depend on the availability of training positions.

Physicians who hold the current LMCC will still be able to apply to any provincial licensing authority, as they do now, by presenting their qualifications. Those who hold the new LMCC will have passed an enhanced examination. The licensing bodies deem it unnecessary and inappro-